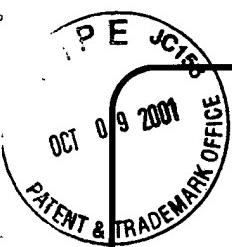


**BAKER BOTTS LLP**

Please type a plus sign (+) inside this box → **+**



## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	09/909,272
		Filing Date	July 19, 2001
		First Named Inventor	EMIL WILLI REPPEL
		Group Art Unit	1734
		Examiner Name	
Total Number of Pages in This Submission		Attorney Docket Number	34513-072432.0164

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Declaration with copy of Notice to File Missing Parts of Nonprovisional Application
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	BakerBotts LLP 30 Rockefeller Plaza New York, NY 10112		
Signature	<i>Frederick C. Carver</i>		
Att Name:	Frederick C. Carver		
PTO Reg:	17,021		
Date	10/05/01		

### CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: **10/05/01**

Typed or printed name	Frederick C. Carver		
Signature	<i>Frederick C. Carver</i>		
	Date	10/05/01	

# BAKER BOTTS LLP

## FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.



**TOTAL AMOUNT OF PAYMENT** (\$ 130)

Complete if Known	
Application Number	09/909,272
Filing Date	July 19, 2001
First Named Inventor	EMIL WILLI REPPEL
Examiner Name	
Group Art Unit	1734
Attorney Docket No.	34513-072432.0164

### METHOD OF PAYMENT

1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:  
 Deposit Account Number **02-4377**  
 Deposit Account Name **Baker Botts LLP**  
 Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17  
 Applicant claims small entity status. See 37 CFR 1.27

2.  Payment Enclosed:  
 Check  Credit card  Money Order  Other

### FEE CALCULATION

#### 1. BASIC FILING FEE

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
740	370	Utility filing fee	
330	165	Design filing fee	
510	255	Plant filing fee	
740	370	Reissue filing fee	
160	80	Provisional filing fee	
<b>SUBTOTAL (1) (\$ 0)</b>			

#### 2. EXTRA CLAIM FEES

Total Claims	-	20 ** =	0	X	Fee from below	=	0	Fee Paid
Independent Claims	-	3 ** =	0	X		=	0	
Multiple Dependent								

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description
18	9	Claims in excess of 20
84	42	Independent claims in excess of 3
280	140	Multiple dependent claim, if not paid
84	42	** Reissue independent claims over original patent
18	9	** Reissue claims in excess of 20 and over original patent
<b>SUBTOTAL (2) (\$ 0)</b>		

\*or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES	Fee Description	Fee Paid
130	65 Surcharge - late filing fee or oath	130
50	25 Surcharge - late provisional filing fee or cover sheet	
130	130 Non-English specification	
2,520	2,520 For filing a request for ex parte reexamination	
920*	920* Requesting publication of SIR prior to Examiner action	
1,840*	1,840* Requesting publication of SIR after Examiner action	
110	55 Extension for reply within first month	
400	200 Extension for reply within second month	
920	460 Extension for reply within third month	
1,440	720 Extension for reply within fourth month	
1,960	980 Extension for reply within fifth month	
320	160 Notice of Appeal	
320	160 Filing a brief in support of an appeal	
280	140 Request for oral hearing	
1,510	1,510 Petition to institute a public use proceeding	
110	55 Petition to revive - unavoidable	
1,280	640 Petition to revive - unintentional	
1,280	640 Utility issue fee (or reissue)	
460	230 Design issue fee	
620	310 Plant issue fee	
130	130 Petitions to the Commissioner	
50	50 Processing fee under 37 CFR 1.17(q)	
180	180 Submission of Information Disclosure Stmt	
40	40 Recording each patent assignment per property (times number of properties)	
740	370 Filing a submission after final rejection (37 CFR § 1.129(a))	
740	370 For each additional invention to be examined (37 CFR § 1.129(b))	
740	370 Request for Continued Examination (RCE)	
900	900 Request for expedited examination of a design application	
Other fee (specify) _____		
*Reduced by Basic Filing Fee Paid		<b>SUBTOTAL (3) (\$ 130)</b>

SUBMITTED BY		Complete if applicable		
Name (Print/Type)	Frederick C. Carver	Registration No. (Attorney/Agent)	17,021	Telephone
Signature	<i>Frederick C. Carver</i>	Date	10/05/01	

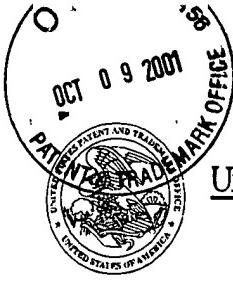
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**BAKER BOTTS** LLP

Attorney Docket Number: 34513-072432.0164

Title: APPARATUS FOR RECAPPING TIRES

Use Space Below for Additional Information:

UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
[www.uspto.gov](http://www.uspto.gov)

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/909,272	07/19/2001	Emil Willi Reppel	34513-072432.0104

21003  
BAKER & BOTTS  
30 ROCKEFELLER PLAZA  
NEW YORK, NY 10112

**CONFIRMATION NO. 2184****FORMALITIES LETTER**

\*OC000000006496294\*

Date Mailed: 08/30/2001

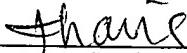
**NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION****FILED UNDER 37 CFR 1.53(b)*****Filing Date Granted***

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.  
*A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.*
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- **The balance due by applicant is \$ 130.**

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*A copy of this notice **MUST** be returned with the reply.*

  
Customer Service Center  
Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE

10/11/2001 HUUONG1 00000033 09909272

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